

**National Pollutant Discharge Elimination System  
Concentrated Animal Feeding Operation Annual Report  
Report Form for February 15, 2004 Submission  
Required Under NPDES General Permit Rule  
LSA Document- #03(E)**



Utilize this form to submit the annual report information as required in Section 11 of the Concentrated Animal Feeding Operation (CAFO) National Pollutant Discharge Elimination System (NPDES) General Permit Rule, adopted as an emergency rule (327 IAC 15-15) by the Water Pollution Control Board which became effective May 14, 2003. This form must be completed, signed, dated, and received by IDEM prior to February 15, 2004. Upon completing the form, please send the form to:

**Confined Feeding Program  
Solid Waste Permits Section  
Office of Land Quality  
Indiana Department of Environmental Management  
Post Office Box 6015  
Indianapolis, Indiana 46206-6015**

**FACILITY INFORMATION**

NPDES General Permit Number: **I N G 8 0** \_\_\_\_\_ (CFO Farm ID # is the same as the last four digits of the NPDES Permit Number)

Date Coverage Obtained: \_\_\_\_\_ (Date IDEM issued NPDES General Permit coverage letter, also listed on cover letter)

County: \_\_\_\_\_

Facility Name: \_\_\_\_\_ Telephone: (\_\_\_\_) \_\_\_\_\_

Location Address: \_\_\_\_\_ Facsimile: (\_\_\_\_) \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Name of Receiving Water Body from Facility (stream/creek/river/lake/ditch): \_\_\_\_\_

Operator Name: \_\_\_\_\_ Telephone: (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_ Facsimile: (\_\_\_\_) \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Owner Name: \_\_\_\_\_ Telephone: (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_ Facsimile: (\_\_\_\_) \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Commercial Manure Hauler (if applicable): \_\_\_\_\_ Telephone: (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_ Facsimile: (\_\_\_\_) \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

TYPE AND NUMBER OF ANIMALS ON-SITE			MANURE, LITTER, AND PROCESS WASTE- WATER PRODUCTION AND DISPOSAL
<b>ANIMAL TYPE</b>	<b># in Open Confinement</b>	<b># Housed Under Roof</b>	<p>a) Estimated amount of total manure, litter, and process wastewater generated by the facility between the date the facility obtained NPDES coverage and December 31, 2003.</p> <p>_____ tons/ gallons/ cubic feet (circle appropriate unit)</p> <p>b) Estimated amount of total manure, litter, and process wastewater transferred to other persons by the facility between the date the facility obtained NPDES coverage and December 31, 2003.</p> <p>_____ tons/ gallons/ cubic feet (circle appropriate unit)</p> <p>c) Amount of acreage either owned, leased, or covered in a land use agreement that the permittee has access to for applying manure, litter, and wastewater generated at the facility. Include the acreage available between the date the facility obtained NPDES coverage and December 31, 2003.</p> <p>_____ acres</p> <p>d) Amount of acreage either owned, leased, or covered in a land use agreement that the permittee utilized for applying manure, litter, and wastewater generated at the facility. Include the acreage used between the date the facility obtained NPDES coverage and December 31, 2003.</p> <p>_____ acres</p>
Mature Dairy Cows			
Dairy Heifers			
Veal Calves			
Feedlot Cattle (not dairy or veal)			
Mature Swine (55lb. or over)			
Nursery Swine (55lb. or under)			
Horses			
Sheep or lambs			
Turkeys			
Chickens (Broilers) / Pullets			
Chicken (Layers)			
Duck			
Other specify:			
<b>TOTAL ANIMALS</b>			
<b><u>DISCHARGE INFORMATION</u></b>			
<p>Has the facility had a discharge of manure, litter, or process wastewater from the production area between the date the facility obtained NPDES coverage and December 31, 2003? <span style="float: right;">Yes <input type="checkbox"/> No <input type="checkbox"/></span></p> <p>If yes, on a separate sheet list the date, time, and approximate volume for each discharge. <span style="float: right;">(circle the answer)</span></p> <p>Attach any and all sheets detailing this information to this form.</p>			
<b><u>CERTIFICATION</u></b>			
<p>"I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations."</p>			
Name and Official Title (print or type)		Phone Number (area code and phone number)	
Signature		Date Signed	